

**CITY OF NORMAN**  
**SUPPLEMENTAL QUESTIONNAIRE**  
**Laboratory Intern (PPT)**  
(Water Treatment Division)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

This questionnaire is a supplement to your application and will be used for further evaluation of your education, training, and experience as it relates to the **LABORATORY INTERN** position for which you applied. **FILL OUT THE QUESTIONNAIRE COMPLETELY EVEN IF THIS INFORMATION IS ON YOUR APPLICATION/RESUME!**

1. Do you have one year of college or vocational/technical school? \_\_\_\_Yes \_\_\_\_No If yes, please explain.

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2. Please describe your coursework in microbiology, chemistry and other related courses.

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3. Please explain your experience with computer applications including, but not limited to Microsoft Excel, Word and Access.

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4. Do you have a valid Oklahoma Driver's License? \_\_\_\_Yes \_\_\_\_No

5. Do you have a Class B Water Operator Laboratory License? \_\_\_\_Yes \_\_\_\_No

6. The work period for this position is twenty (20) hours per week. Please list what hours/days you are available to work.

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7. List any other information, including personal strengths, that you feel will aid us in determining your qualifications for this position.

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**EQUAL OPPORTUNITY EMPLOYER**